**Application or Docket Number** 

## BEST AVAILABLE COPY PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

020211-00050005

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			25				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			25 minus 20=		• 5			X\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS			<b>3</b> minus 3 =		6			X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in			olumn 2	L	TOTAL		OR	TOTAL	800
	CI	LAIMS AS A	MENDED - PART II					<del>-,,</del>			OTHER THAN	
	ANGES OF STREET, STREE	(Column 1)		(Colu		(Column 3)	1 -	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	F.O. A.13.4	=		X40=		OR	X80=	-
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		J [	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		:	:			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	11	X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN.	T CLAIM		┧┟	+135=		OR	+270=	
							L	TOTAL		ΩB	TOTAL	
	•	(Oakuman 4)		(Calu	O\	(Column 3)		ADDIT. FEE			ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	mn 2) HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	] [	X\$ 9=		OR	X\$18=	ï
	Independent	<u> </u> *	Minus	***		=	┧╏	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=							+135=		OR	+270=	
*	If the entry in colu	mn 1 is less than t	he entry in colu	mn 2, writ	te "0" in co	olumn 3. nn 20. enter "20	. L	TOTAL		OR	TOTAL	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											